

CHARLOTTE COUNTY WASTEWATER EXPANSION PHASE 2 SEPTIC TANK LOCATION FORM & DRAWING

Dear Resident:

As part of Charlotte County Wastewater Expansion Phase 2, there are plans for installing a centralized sewer system in your neighborhood. One of the key elements in the design of a cost-efficient retrofit sewer project is cooperation from home and business owners.

We are asking that you provide some important information to help in designing the centralized sewer system that is compatible with the existing on-site wastewater disposal system on your property. The information that you provide may help minimize the disruption of your property when your on-site connection is made and may possibly reduce on-site costs.

Please note that we will try to provide the best connection point location for each property; however, because of overall design considerations, we **cannot guarantee** that it will be placed at the exact location that you indicate.

On the other side of this letter are a short form to fill in and a drawing for you to use to verify, to the best of your ability, the location of your septic tank(s) and your preferred location for connecting to the County's sewer system. If the location for your septic tank is not known, please note on the drawing and assistance will be provided in the near future for locating the septic tank.

Additionally, if you are currently using a potable water well for your drinking water supply, please indicate the location of the well head on the drawing. If the location is not known, please note on the drawing and assistance will be provided in the near future for locating the well.

After completing, please mail this form to:

**Attn: Dennis Croyle, Project Manager
Giffels-Webster Engineers, Inc.
900 Pine Street, Suite 225
Englewood, FL 34223**

Thank you for your time and consideration.

(SEE OTHER SIDE FOR FORM & DRAWING)

CHARLOTTE COUNTY WASTEWATER EXPANSION PHASE 2 SEPTIC TANK LOCATION FORM & DRAWING

Date: _____

Phone No. : _____

Name: _____

Property Address: _____

Mailing Address (If different): _____

Property Tax ID # (If known): _____

Own: _____ Rent: _____ Septic System Age (Approx.): _____

ON THE DRAWING BELOW:

Please circle your septic tank location, show driveway location and indicate preferred location along the street for your sewer connection. Also mark the location of any drinking water wells, if applicable.

